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I hereby revoke all previous powers of attorney given in the application identified in the attached statement under 37 CFR 3.73(b).

I hereby appoint:

☒ Practitioners associated with Customer Number:

58027

DE

☐ Practitioner(s) named below (if more than ten patient practitioners are to be named, then a customer number must be used)

Name		Registration Number	Name		Registration Number

as attorney(s) or agent(s) to represent the undersigned before the United States Patent and Trademark Office (USPTO) in connection with any and all patent applications assigned only to the undersigned according to the USPTO assignment records or assignment documents attached to this form in accordance with 37 CFR 3.73(b).

Please change the correspondence address for the application identified in the attached statement under 37 CFR 3.73(b) to:

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Assignee Name and Address:

Assignee name and address:
Insert assignee's name Samsung SDI Co., LTD.
100-1, Jangjeon-ro, Yuseong-gu, Daejeon, Korea

insert assignee's address: 576 Shin-dong, Yeongtong-gu

Insert address's address

insert assignee's address
insert assignor's addressinsert assignee's address
insert assignee's address

A copy of this form, together with a statement under 27 CFR 3.73(b) (Form PTO/SB/94 or equivalent) is required to be filed in each application in which this form is used. The statement under 27 CFR 3.73(b) may be completed by one of the practitioners appointed in this form. If the appointed practitioner is authorized to act on behalf of the assignee, and must identify the application in which this Power of Attorney is to be filed.

SIGNATURE of Assignee of Record

SIGNATURE of Assignee of Record
The individual whose signature and title is supplied below is authorized to act on behalf of the assignee.

Signature:

Native

The

Date 2005. 12. 30

Telephone

[illegible]